



TO: HHS LGBT Coordinating Committee

FROM: Health Resources and Services Administration (HRSA)  
Tina M. Cheatham, Senior Advisor to the Administrator

DATE: January 27, 2012

RE: 2011 Annual Report to HHS LGBT Coordinating Committee

On April 15, 2010, President Obama issued a Presidential Memorandum to Secretary Sebelius on hospital visitation requesting that “participating hospitals may not deny visitation privileges on the basis of race, color, national origin, religion, sex, sexual orientation, gender identity, or disability.” In this memorandum, he also requested that the Department of Health and Human Services (HHS) provide additional recommendations on health care issues that affect Lesbian, Gay, Bisexual, and Transgender (LGBT) patients and their families.

To support the work of Secretary Sebelius’ LGBT Coordinating Committee, HRSA Administrator, Dr. Mary K. Wakefield, established an agency-wide LGBT Workgroup with representatives from each of the Bureaus and Offices. This workgroup currently has three internal subgroups on cultural competency, grants and administrative issues, and data and research:

- The Cultural Competence Subgroup has developed a list of cultural competence resources on serving LGBT people and offered recommendations for a HRSA/SAMHSA joint listening session with LGBT providers and students on training needs.
- The Grants and Administrative Issues Subgroup is compiling a list of HRSA programs that might benefit LGBT communities and developing a plan to inform them of upcoming funding opportunities. The group is identifying ways HRSA can capitalize on existing opportunities to improve HRSA services and supports, service delivery models, and programmatic interventions for LGBT populations.
- The Data and Research Subgroup is focusing on HRSA’s data collection activities and future health services research on LGBT populations. The group is preparing a research paper documenting HRSA LGBT data collection and reporting activities, which will be presented at the 2012 National Health Promotion Summit in April. The group is preparing recommendations on ways HRSA can capitalize on existing opportunities to improve HRSA service and support activities, service delivery models, and programmatic interventions for LGBT populations.

HRSA’s mission is “to improve health and achieve health equity through access to quality services, a skilled health workforce and innovative programs.” In communities across the

country, HRSA's health programs are working to level the playing field for people who are underserved, geographically isolated, and medically vulnerable. That includes LGBT people.

HRSA has been working on issues that impact LGBT communities for decades to better meet the health needs of these communities. The following is a list of HRSA-supported activities and accomplishments in 2011.

## 1. Grants and Contracts

- **Homelessness and LGBT Youth:** HRSA's Maternal and Child Health Bureau funded a study on homelessness among gay and lesbian high school students. The study was funded through the Leadership Education in Adolescent Health (LEAH) grant to Children's Hospital Boston. This study was published in the *Journal of American Public Health* in July 2011.
- **Transgender Health:** HRSA's HIV/AIDS Bureau has drafted a new Funding Opportunity Announcement (FOA) for a Special Project of National Significance demonstration project focused on improving access to and retention in care for transgender women of color living with HIV. The project is scheduled to begin in September 2012.
- **LGBT Training and Technical Assistance Center for Health Centers:** In September, HRSA awarded \$248,000 to the Fenway Institute to create a National Training and Technical Assistance Center to help community health centers improve the delivery of health care services for LGBT populations. The Fenway Institute is the research, training and policy arm of Fenway Health, a community health center that has served the LGBT community in Boston for more than 40 years.

Training and technical assistance will be based on *The Fenway Guide to LGBT Health*, the only clinical text book on LGBT health and published in collaboration with the American College of Physicians in 2008. Fenway will recruit leading figures in the field of LGBT health to:

- Lead seminars and webinars;
- Consult to clinicians and administrators;
- Develop print and on-line materials; and
- Develop individually tailored curricula addressing fiscal and program management, operational and administrative support, and program development/analysis.

Fenway will work closely with state primary care associations to ensure all geographic regions can access on-site training to maximize the project's scope and reach.

- **LGBT Populations Included in Health Center Applications:** In June 2011, HRSA updated Form 4, Community Characteristics, which is part of the health center program application, to include LGBTs in the list of populations an applicant can select as being served by health centers. In addition, HRSA added LGBT people as an example of a target population in the eligibility requirements section for several health center competitions.

*“Applicant proposes access to services for all individuals in the service area or target population. In other words, applicant does not propose to exclusively serve a single age group (e.g., children, elderly) or health issue/disease category (e.g., HIV/AIDS). In instances where a sub-population is being targeted within the service area or target population (e.g., homeless children, adolescents/children in schools; gay, lesbian, bisexual, or transgender individuals, etc.), the applicant must ensure that health care services will be made available to others in need of care who seek services at the proposed site(s).”*

## 2. Policy Initiatives

- **Cultural and Linguistic Competence and Health Literacy:** In June 2011, HRSA released a Grants Policy Operations Memorandum that provides guidance to fully integrate cultural and linguistic competence and health literacy factors into FOAs. This policy sets the stage for a clearer expression of LGBT issues related to cultural competency. Below is the language from the “Background and Definitions” section:

*HRSA programs serve culturally and linguistically diverse communities and multiple cultures. Although race and ethnicity are often thought to be dominant elements of culture, HRSA funded programs embrace a broader definition to include language, gender, socio-economic status, sexual orientation and gender identity, physical and mental capacity, age, religion, housing status, and regional differences. Organizational behaviors, practices, attitudes, and policies across all HRSA-supported entities respect and respond to the cultural diversity of communities, clients and students served.*

## 3. Cultural Competency, Capacity Building Efforts, and Workforce Development

- **Health Professions:** HRSA has been collaborating with the National Coalition for LGBT Health to educate LGBT health professions students about the National Health Service Corps (NHSC) and to educate NHSC members about working with the LGBT community. In April, the NHSC participated in the *2nd Annual LGBT Health Student Symposium* to educate health professions students about opportunities available through the NHSC.
- **Health Professional Shortage Areas:** The Affordable Care Act established the “Negotiated Rulemaking Committee on the Designation of Medically Underserved Areas/Populations and Health Professional Shortage Areas.” The Committee, staffed by HRSA, was comprised of 28 members from public, private and educational sectors, including a federal representative from HRSA. Dr. Beth Wilson, the Program Director for the Program in Medical Education for the Urban Underserved at the University of California, San Francisco Medical School, represents the LGBT community and was an active participant on the committee, chairing one of the key sub-committees.
- **Cultural and Linguistic Competency:**
  - **LGBT Health Care:** HRSA has begun the work to expand its existing web course “*Effective Communication Tools for Healthcare Professions*” to include LGBT

content. This new content will be designed to educate health care providers on the unique cultural, linguistic, and health literacy needs of LGBT patient populations with special consideration of many other factors including socio-cultural, ethnic, linguistic, and health literacy issues. Anticipated rollout of the expanded course is October 2012.

- **Geriatrics Education Training:** In July 2009, HRSA awarded a Comprehensive Geriatrics Education Program grant to Howard Brown Medical Center (Chicago, IL) to develop a cultural competency curriculum focused on providing health care to LGBT elderly patients. The curriculum has a specific emphasis on nursing education and is currently being tested with an anticipated release date in June 2012.
- **AIDS Education and Training Center (AETC):** HRSA's Ryan White HIV/AIDS Program Part F funds AETCs. The AETCs have developed cultural competency training materials on providing better care to LGBT patients. A sample of topics covered includes transgender, men who have sex with men, maternal and adolescent health, gender identity, and mental health.
- HRSA hosted two webinars providing care to LGBT communities to the National Health Service Corps in October. The webinars are available on the NHSC training portal: <http://primarycareforall.org/training/on-demand-webinars/>.
- HRSA held a Technical Assistance conference call for health center provider in October. The conference focused on the importance of recognizing and addressing the unique health experiences and needs of LGBT populations and reiterates the Administration's commitment to address LGBT health disparities. The recording and transcript from the call can be accessed from the following links:  
<http://bphc.hrsa.gov/technicalassistance/taresources/10242011transcript.pdf>  
<http://bphc.hrsa.gov/technicalassistance/taresources/102411taconfcall.mp3>
- Administrator Mary Wakefield and HRSA staff participated in the 2011 National Coalition for LGBT Health Annual Meeting in October. HRSA staff was engaged in rich conversation with attendees on how HRSA can better serve the LGBT communities.
- HRSA and SAMHSA held a joint listening session with LGBT providers and students in November. Administrators from both Agencies led the discussion with representatives from more than 20 organizations participating. The organizations represented a wide spectrum that ranged from individual practitioner to community-based health clinics to academia. The Two-Spirit community was represented as well. The goal of this meeting was to hear from the organizations on the following issues:
  - What are the training challenges and opportunities for LGBT providers?
  - What strategies would be helpful to increase culturally competent care for LGBT patients?
  - How/what levers can be used to advance cultural competency through health professions training? (inclusive of behavioral health)
  - How can HHS use its health professions grants to encourage inclusion of cultural competency materials?

- A symposium entitled *Advancing Transgender Health: A Symposium to Improve Access to High Quality Prevention and Care Services* was attended by Ryan White-funded HIV service providers immediately following the Annual Ryan White Clinical Conference in Tampa, FL in June 2011.

#### 4. Data and Measurement Strategies

- **LGBT Populations Included in Health Center Applications:** In June, HRSA updated Form 4, Community Characteristics, which is part of the health center program application, to include LGBTs in the list of populations an applicant can select as being served by health centers. In addition, HRSA added LGBT people as an example of a target population in the eligibility requirements section for several health center competitions. (NOTE: This is also reported in the grants section.)
- **HIV/AIDS Care:** HRSA administers the Ryan White HIV/AIDS Program and supports a range of activities to address HIV/AIDS care needs among men who have sex with men (MSM), especially MSM of color. Health care agencies funded through the Ryan White HIV/AIDS Program have undertaken many different strategies to engage and retain MSM in HIV/AIDS care. These programs seek to deliver high-quality, nonjudgmental services to help MSM acknowledge their risk, get tested, and stay in care over time.

HRSA routinely collects and publishes data on transgender people. Since 2000, HRSA has collected the number of transgender clients served by the Ryan White Program in its CARE Act Data Reports and Ryan White Data Reports. In May 2005, HAB conducted a consultation meeting with transgender Americans who are affected by HIV/AIDS. Following recommendations made at this consultation meeting, HAB is now collecting transgender client data broken down into male-to-female and female-to-male categories in the Ryan White Services Report.

#### 5. Stakeholder Outreach

- HRSA Administrator Mary Wakefield and HRSA's senior staff met with 16 LGBT community leaders in March. The meeting was organized by the National Coalition for LGBT Health and focused on how HRSA can better reach out to LGBT providers through the National Health Service Corps, provide better care to LGBT patients at community health centers, and encourage cultural competency training across HRSA's programs.
- Senior leadership from HRSA's Bureau of Primary Health Care met with the National Association of Community Health Center's LGBT Workgroup in March to explore ways to improve services to LGBT patients seen at health centers.
- HRSA participated in the planning of the White House Conference on Bullying, which was held in March. Dr. Wakefield facilitated a breakout session on community involvement.
- HRSA participated in the Federal LGBTQ (lesbian, gay, bisexual, transgender, and questioning) Youth Summit held in June, sponsored by the Department of Education.

HRSA staff members led a workshop on youth leadership and delivered presentations on suicide prevention and on the *Stop Bullying Now! Campaign*.

- HRSA staff presented and provided educational resources on *Stop Bullying Now! Campaign* at the Ryan White Part D Quality Improvement Conference in August.

## 6. Public Education and Communication Initiative/Efforts

- **Adolescent Health:** HRSA's Leadership Education in Adolescent Health (LEAH) Training Program provides interdisciplinary leadership training in adolescent health for five core disciplines including medicine, nursing, nutrition, psychology, and social work. The grantees, including schools of public health and nursing, have provided didactic training, leadership activities, research, and community experiences. Some specific examples:
  - **Children's Hospital Boston/Harvard Medical School:** The Boston LEAH has numerous activities related to LGBT youth including a Postdoctoral Fellowship, major research and grants related to sexual minority youth, and scholarly publications. They have trained numerous leaders in the field. The leadership curriculum for fellows includes content on the medical and psychological challenges experienced by LGBT youth, and the two LEAH websites for adolescents, [www.youngwomenshealth.org/](http://www.youngwomenshealth.org/) and [www.youngmenshealthsite.org/](http://www.youngmenshealthsite.org/) have health information for LGBT youth and their families.
  - **University of Minnesota:** An ongoing component of the LEAH core seminar series for all fellows includes a focus on the health and social needs of LGBT youth. The long-standing youth and AIDS projects have maintained a consistent research and service presence related to promoting the health and well-being of LGBT youth.
  - **University of California, San Francisco:** The UCSF nursing project has an ongoing relationship with the Family Acceptance Project, a community research, intervention, education and policy initiative that works to decrease major health and related risks for LGBT youth, such as suicide, substance abuse, HIV and homelessness in the context of their families. The faculty train primary health providers to assess for sexual orientation, but to also assess and intervene with family responses to their gay children, and to promote support and acceptance. In 2009, the Adolescent Health Working Group introduced the Sexual Health Module of the Adolescent Provider Toolkit. Fully integrated in this module are the health needs of LGBTQ youth. [www.ahwg.net/assets/library/104\\_sexualhealthtoolkit2010bw.pdf](http://www.ahwg.net/assets/library/104_sexualhealthtoolkit2010bw.pdf).
- **Women's Health USA:** HRSA issued *Women's Health USA 2011* in October, the tenth edition of an annual data book identifying priorities, trends and disparities in women's health. The 2011 edition featured data on the health of lesbian and bisexual women for the first time. <http://www.mchb.hrsa.gov/whusa11/>

## 7. Employment or Other Management Issues

- HRSA collaborated with SAMHSA in the joint Pride Month celebration. Keynote speakers included Director of the Office of Personnel Management, John Berry, and the late LGBT movement pioneer, Dr. Frank Kameny. In addition, both agency Administrators participated in the event at SAMHSA headquarters.
- HRSA updated equal opportunity statements with new language for non-discrimination policies that include gender identity.
- HRSA's Office of Information Technology unblocked websites to allow employees access to LGBT news and health-related information.

## 8. Federal Interagency and Public/Private Collaborations

- **Anti-Bullying:** HRSA participates in the management and content review of the one federal portal for bullying information: <http://stopbullying.gov>. The Trevor Project, a non-profit organization focusing on ending suicide among LGBTQ (lesbian, gay, bisexual, transgender, and questioning) youth, is now a partner with the *Stop Bullying Now! Campaign*.
- **Healthy People 2020:** HRSA co-leads the Healthy People 2020 LGBT Workgroup with HHS' Office of Minority Health. The workgroup is tasked with developing the content for the new LGBT Health topic area.
  - Workgroup proposed a developmental objective which has been presented to the Healthy People Federal Interagency Workgroup for approval. The proposed developmental objective focuses on collection of LGBT population data in population-based data systems. This developmental objective will be displayed in the "Objectives" section of the LGBT Health webpage.
  - Workgroup identified a list of related topic areas from the current list of HP 2020 topics that are relevant to LGBT health. The list of related topic areas is displayed on the LGBT Health webpage.
  - Workgroup identified a key set of objectives from the list of related topic areas to demonstrate issues that are most pressing to the LGBT populations including education achievement, bullying, tobacco and illicit substance use, HIV, health service access, etc. This set of objectives will be listed in the "Objectives" section of the LGBT Health webpage.
  - Workgroup drafted two supplemental information documents on access to health services and on HIV. The purpose of these documents is to present data and findings from current, peer-reviewed literature, highlighting the disparities and issues in LGBT populations. These documents are being finalized for Departmental clearance.
  - Workgroup prepared a list of resources, developed by the Federal Government, for the public to learn more about the LGBT health. This list will be posted on the LGBT Health webpage.

- **National Action Alliance for Suicide Prevention LGBT Task Force:** HRSA representative participates in this national initiative that is a public/private collaboration focused on identifying national strategies to end suicide among LGBTQ persons across the lifespan. <http://actionallianceforsuicideprevention.org/>

HRSA's mission strikes at the heart of the struggles faced by far too many LGBT Americans, a mission that is aimed at "improving health and achieving health equity through access to quality services, through a skilled health workforce and through innovative programs."

In communities across the country, HRSA's health programs will continue to work to level the playing field for people who are underserved, geographically isolated, and medically vulnerable.